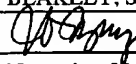
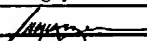




|  |   |                        |                    |
|--|---|------------------------|--------------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> |   | Application No.        | 10/676,961         |
|  |   | Filing Date            | September 30, 2003 |
|  |   | First Named Inventor   | Florence R. Pon    |
|  |   | Art Unit               | 2815               |
|  |   | Examiner Name          | Chris C. Chu       |
| Total Number of Pages in This Submission   | 6 | Attorney Docket Number | 42P17605           |

| ENCLOSURES (check all that apply)   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> PTO/SB/08<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Basic Filing Fee<br><input type="checkbox"/> Declaration/POA<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below):<br><div style="border: 1px solid black; height: 60px; width: 100%;"></div> |
| Remarks   |   |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |
|--|---|
| Firm or Individual name                    | Thinh V. Nguyen, Reg. No. 42,034<br>BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP          |
| Signature                                  |  |
| Date                                       | November 30, 2004   |

| CERTIFICATE OF MAILING/TRANSMISSION  |   |      |                   |
|--|---|------|-------------------|
| I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office. |   |      |                   |
| Typed or printed name  | Tu T. Nguyen  |      |                   |
| Signature  |  | Date | November 30, 2004 |


Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 06/04/2004  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

| <b>FEE TRANSMITTAL<br/>for FY 2004</b>   |  | <i>Complete if Known</i> |                    |
|--|--|--------------------------|--------------------|
| <small>Effective 01/01/2004. Patent fees are subject to annual revision.</small> |  | Application Number       | 10/676,961         |
|  |  | Filing Date              | September 30, 2003 |
|  |  | First Named Inventor     | Florence R. Pon    |
|  |  | Examiner Name            | Chris C. Chu       |
|  |  | Art Unit                 | 2815               |
|  |  | Attorney Docket No.      | 42P17605           |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.  |  |                          |                    |
| TOTAL AMOUNT OF PAYMENT (\$)   |  |                          |                    |

| METHOD OF PAYMENT (check all that apply)   | FEE CALCULATION (continued)   |              |          |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
|--|---|--------------|----------|--|-------------------------------------|-----------------|----------|----------|----------|--------------------|--------------------|------|-----|------|-----|-------------------------------------|--|------|-----|------|-----|--|--|------|-----|--------------|-----|---------------------------|--|-----------------|----------|----------|----------|--|----------|------|-------|------|-------|--|--|--------------|---------|------|---------|---|------|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|--------------|-------|------|-----|---|------|------|-------|------|-------|--|--|------|-----|------|-----|------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|--|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|---------------------------|--|--|--|--|--|------------------------------------|--|--|--|--|--|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account   | <b>3. ADDITIONAL FEES</b><br><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>2053</td> <td>130</td> <td>2053</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for expedited reexamination</td> <td></td> </tr> <tr> <td>1804</td> <td>920 *</td> <td>1804</td> <td>920 *</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805</td> <td>1,840 *</td> <td>1805</td> <td>1,840 *</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>65</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252</td> <td>430</td> <td>2252</td> <td>215</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253</td> <td>880</td> <td>2253</td> <td>490</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>1,530</td> <td>2254</td> <td>765</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>2,080</td> <td>2255</td> <td>1,040</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1404</td> <td>340</td> <td>2401</td> <td>170</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402</td> <td>340</td> <td>2402</td> <td>170</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>300</td> <td>2403</td> <td>150</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>2451</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td>Petition to revive - unavoidable</td> <td></td> </tr> <tr> <td>1453</td> <td>1,370</td> <td>2453</td> <td>885</td> <td>Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>1501</td> <td>1,370</td> <td>2501</td> <td>685</td> <td>Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>1502</td> <td>490</td> <td>2502</td> <td>245</td> <td>Design issue fee</td> <td></td> </tr> <tr> <td>1503</td> <td>660</td> <td>2503</td> <td>330</td> <td>Plant issue fee</td> <td></td> </tr> <tr> <td>1460</td> <td>130</td> <td>2460</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> <td>Processing fee under 37 CFR 1.17(c)</td> <td></td> </tr> <tr> <td>1806</td> <td>180</td> <td>1806</td> <td>180</td> <td>Submission of Information Disclosure Sheet</td> <td></td> </tr> <tr> <td>8021</td> <td>40</td> <td>8021</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>1809</td> <td>790</td> <td>1809</td> <td>395</td> <td>Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td>1810</td> <td>790</td> <td>2810</td> <td>395</td> <td>For each additional invention to be examined (37 CFR § 1.129(b))</td> <td></td> </tr> <tr> <td>1801</td> <td>790</td> <td>2801</td> <td>395</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>1802</td> <td>900</td> <td>1802</td> <td>900</td> <td>Request for expedited examination of a design application</td> <td></td> </tr> <tr> <td colspan="6">Other fee (specify) _____</td> </tr> <tr> <td colspan="6" style="text-align: right;">* Reduced by Basic Filing Fee Paid</td> </tr> </tbody> </table> | Large Entity |          | Small Entity   |                                     | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code           | Fee (\$)           | 1051 | 130 | 2051 | 65  | Surcharge - late filing fee or oath |  | 1052 | 50  | 2052 | 25  | Surcharge - late provisional filing fee or cover sheet |  | 2053 | 130 | 2053         | 130 | Non-English specification |  | 1812            | 2,520    | 1812     | 2,520    | For filing a request for expedited reexamination |          | 1804 | 920 * | 1804 | 920 * | Requesting publication of SIR prior to Examiner action |  | 1805         | 1,840 * | 1805 | 1,840 * | Requesting publication of SIR after Examiner action |      | 1251 | 110 | 2251 | 65  | Extension for reply within first month |  | 1252 | 430 | 2252 | 215 | Extension for reply within second month           |  | 1253 | 880 | 2253 | 490 | Extension for reply within third month                    |  | 1254         | 1,530 | 2254 | 765 | Extension for reply within fourth month |      | 1255 | 2,080 | 2255 | 1,040 | Extension for reply within fifth month |  | 1404 | 340 | 2401 | 170 | Notice of Appeal |  | 1402 | 340 | 2402 | 170 | Filing a brief in support of an appeal |  | 1403 | 300 | 2403 | 150 | Request for oral hearing |  | 1451 | 1,510 | 2451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,370 | 2453 | 885 | Petition to revive - unintentional |  | 1501 | 1,370 | 2501 | 685 | Utility issue fee (or reissue) |  | 1502 | 490 | 2502 | 245 | Design issue fee |  | 1503 | 660 | 2503 | 330 | Plant issue fee |  | 1460 | 130 | 2460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(c) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Sheet |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 790 | 1809 | 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 1801 | 790 | 2801 | 395 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  | * Reduced by Basic Filing Fee Paid |  |  |  |  |  |
| Large Entity   |   | Small Entity |          | Fee Description  | Fee Paid                            |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| Fee Code   |   | Fee (\$)     | Fee Code |  |                                     | Fee (\$)        |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1051   |   | 130          | 2051     | 65   | Surcharge - late filing fee or oath |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1052   | 50  | 2052         | 25       | Surcharge - late provisional filing fee or cover sheet                     |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 2053   | 130   | 2053         | 130      | Non-English specification  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1812   | 2,520   | 1812         | 2,520    | For filing a request for expedited reexamination                           |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1804   | 920 *   | 1804         | 920 *    | Requesting publication of SIR prior to Examiner action                     |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1805   | 1,840 *   | 1805         | 1,840 *  | Requesting publication of SIR after Examiner action                        |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1251   | 110   | 2251         | 65       | Extension for reply within first month                                     |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1252   | 430   | 2252         | 215      | Extension for reply within second month                                    |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1253   | 880   | 2253         | 490      | Extension for reply within third month                                     |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1254   | 1,530   | 2254         | 765      | Extension for reply within fourth month                                    |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1255   | 2,080   | 2255         | 1,040    | Extension for reply within fifth month                                     |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1404   | 340   | 2401         | 170      | Notice of Appeal   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1402   | 340   | 2402         | 170      | Filing a brief in support of an appeal                                     |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1403   | 300   | 2403         | 150      | Request for oral hearing   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1451   | 1,510   | 2451         | 1,510    | Petition to institute a public use proceeding                              |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1452   | 110   | 2452         | 55       | Petition to revive - unavoidable   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1453   | 1,370   | 2453         | 885      | Petition to revive - unintentional   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1501   | 1,370   | 2501         | 685      | Utility issue fee (or reissue)   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1502   | 490   | 2502         | 245      | Design issue fee   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1503   | 660   | 2503         | 330      | Plant issue fee  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1460   | 130   | 2460         | 130      | Petitions to the Commissioner  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1807   | 50  | 1807         | 50       | Processing fee under 37 CFR 1.17(c)  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1806   | 180   | 1806         | 180      | Submission of Information Disclosure Sheet                                 |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 8021   | 40  | 8021         | 40       | Recording each patent assignment per property (times number of properties) |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1809   | 790   | 1809         | 395      | Filing a submission after final rejection (37 CFR § 1.129(a))              |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1810   | 790   | 2810         | 395      | For each additional invention to be examined (37 CFR § 1.129(b))           |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1801   | 790   | 2801         | 395      | Request for Continued Examination (RCE)                                    |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1802   | 900   | 1802         | 900      | Request for expedited examination of a design application                  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| Other fee (specify) _____  |   |              |          |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| * Reduced by Basic Filing Fee Paid   |   |              |          |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| The Commissioner is authorized to: (check all that apply)<br><input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.18, 1.17, 1.18 and 1.20.<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account  |   |              |          |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| <b>FEE CALCULATION</b>   |   |              |          |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>790</td> <td>2001</td> <td>395</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002</td> <td>350</td> <td>2002</td> <td>175</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>550</td> <td>2003</td> <td>275</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>790</td> <td>2004</td> <td>395</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$)</td> </tr> </tbody> </table>   |   | Large Entity |          | Small Entity   |                                     | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code           | Fee (\$)           | 1001 | 790 | 2001 | 395 | Utility filing fee                  |  | 1002 | 350 | 2002 | 175 | Design filing fee                                      |  | 1003 | 550 | 2003         | 275 | Plant filing fee          |  | 1004            | 790      | 2004     | 395      | Reissue filing fee                               |          | 1005 | 160   | 2005 | 80    | Provisional filing fee                                 |  | SUBTOTAL (1) |         |      |         |   | (\$) |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| Large Entity   |   | Small Entity |          | Fee Description  | Fee Paid                            |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| Fee Code   | Fee (\$)  | Fee Code     | Fee (\$) |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1001   | 790   | 2001         | 395      | Utility filing fee   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1002   | 350   | 2002         | 175      | Design filing fee  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1003   | 550   | 2003         | 275      | Plant filing fee   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1004   | 790   | 2004         | 395      | Reissue filing fee   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1005   | 160   | 2005         | 80       | Provisional filing fee   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| SUBTOTAL (1)   |   |              |          |  | (\$)                                |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| <b>2. EXTRA CLAIM FEES</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Total Claims</th> <th colspan="2">Extra Claims</th> <th colspan="2">Fee from below</th> <th colspan="2">Fee Paid</th> </tr> <tr> <th>Independent Claims</th> <th>Multiple Dependent</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>20</td> <td>3</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>88</td> <td>2201</td> <td>44</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>300</td> <td>2203</td> <td>150</td> <td>Multiple Dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>88</td> <td>2204</td> <td>44</td> <td>**Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>**Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$)</td> </tr> </tbody> </table> |   | Total Claims |          | Extra Claims   |                                     | Fee from below  |          | Fee Paid |          | Independent Claims | Multiple Dependent |      |     |      |     |                                     |  | 20   | 3   |      |     |  |  |      |     | Large Entity |     | Small Entity              |  | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code   | Fee (\$) | 1202 | 18    | 2202 | 9     | Claims in excess of 20                                 |  | 1201         | 88      | 2201 | 44      | Independent claims in excess of 3                   |      | 1203 | 300 | 2203 | 150 | Multiple Dependent claim, if not paid  |  | 1204 | 88  | 2204 | 44  | **Reissue independent claims over original patent |  | 1205 | 18  | 2205 | 9   | **Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) |       |      |     |   | (\$) |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| Total Claims   |   | Extra Claims |          | Fee from below   |                                     | Fee Paid        |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| Independent Claims   | Multiple Dependent  |              |          |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 20   | 3   |              |          |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| Large Entity   |   | Small Entity |          | Fee Description  | Fee Paid                            |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| Fee Code   | Fee (\$)  | Fee Code     | Fee (\$) |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1202   | 18  | 2202         | 9        | Claims in excess of 20   |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1201   | 88  | 2201         | 44       | Independent claims in excess of 3  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1203   | 300   | 2203         | 150      | Multiple Dependent claim, if not paid                                      |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1204   | 88  | 2204         | 44       | **Reissue independent claims over original patent                          |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| 1205   | 18  | 2205         | 9        | **Reissue claims in excess of 20 and over original patent                  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| SUBTOTAL (2)   |   |              |          |  | (\$)                                |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |
| <small>*or number previously paid, if greater. For Reissues, see below</small>   |   |              |          |  |                                     |                 |          |          |          |                    |                    |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |              |     |                           |  |                 |          |          |          |  |          |      |       |      |       |  |  |              |         |      |         |   |      |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |              |       |      |     |   |      |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |  |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                    |  |  |  |  |  |

| <b>SUBMITTED BY</b> |   | <i>Complete (if applicable)</i>   |                |
|---------------------|---|-----------------------------------|----------------|
| Name (Print/Type)   | Thinh V. Nguyen   | Registration No. (Attorney/Agent) | 42,034         |
| Signature           |  | Telephone                         | (714) 557-3800 |
|                     |   | Date                              | 11/30/04       |

Based on PTO/SB/17 (10-03) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 02/10/2004.  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

# FEE TRANSMITTAL for FY 2004

Effective 01/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

## Complete if Known

|                      |                    |
|----------------------|--------------------|
| Application Number   | 10/676,961         |
| Filing Date          | September 30, 2003 |
| First Named Inventor | Florence R. Pon    |
| Examiner Name        | Chris C. Chu       |
| Art Unit             | 2815               |
| Attorney Docket No.  | 42PI7605           |

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None  
☒ Deposit Account

Deposit Account Number: 02-2666

Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) or underpayment of fee as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

## FEE CALCULATION

## 1. BASIC FILING FEE

| Large Entity |          | Small Entity |          | Fee Description        | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |                        |          |
| 1001         | 790      | 2001         | 395      | Utility filing fee     |          |
| 1002         | 350      | 2002         | 175      | Design filing fee      |          |
| 1003         | 550      | 2003         | 275      | Plant filing fee       |          |
| 1004         | 790      | 2004         | 395      | Reissue filing fee     |          |
| 1005         | 160      | 2005         | 80       | Provisional filing fee |          |
| SUBTOTAL (1) |          |              |          |                        | (\$)     |

## 2. EXTRA CLAIM FEES

Total Claims: 20 \* =  X  =

Independent Claims: 3 =  X  =

Multiple Dependent

| Large Entity |          | Small Entity |          | Fee Description   | Fee Paid |
|--------------|----------|--------------|----------|---|----------|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |   |          |
| 1202         | 18       | 2202         | 9        | Claims in excess of 20                                    |          |
| 1201         | 88       | 2201         | 44       | Independent claims in excess of 3                         |          |
| 1203         | 300      | 2203         | 150      | Multiple Dependent claim, if not paid                     |          |
| 1204         | 88       | 2204         | 44       | **Reissue independent claims over original patent         |          |
| 1205         | 18       | 2205         | 9        | **Reissue claims in excess of 20 and over original patent |          |
| SUBTOTAL (2) |          |              |          |   | (\$)     |

\*or number previously paid, if greater; For Reissues, see below

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

| Large Entity        |          | Small Entity |          | Fee Description  | Fee Paid |
|---------------------|----------|--------------|----------|--|----------|
| Fee Code            | Fee (\$) | Fee Code     | Fee (\$) |  |          |
| 1051                | 130      | 2051         | 65       | Surcharge - late filing fee or oath  |          |
| 1052                | 60       | 2052         | 25       | Surcharge - late provisional filing fee or cover sheet                     |          |
| 2053                | 130      | 2053         | 130      | Non-English specification  |          |
| 1812                | 2,520    | 1812         | 2,520    | For filing a request for ex parte reexamination                            |          |
| 1804                | 920 *    | 1804         | 920 *    | Requesting publication of SIR prior to Examiner action                     |          |
| 1805                | 1,840 *  | 1805         | 1,840 *  | Requesting publication of SIR after Examiner action                        |          |
| 1251                | 110      | 2251         | 55       | Extension for reply within first month                                     |          |
| 1252                | 430      | 2252         | 215      | Extension for reply within second month                                    |          |
| 1253                | 860      | 2253         | 430      | Extension for reply within third month                                     |          |
| 1254                | 1,530    | 2254         | 765      | Extension for reply within fourth month                                    |          |
| 1255                | 2,080    | 2255         | 1,040    | Extension for reply within fifth month                                     |          |
| 1404                | 340      | 2401         | 170      | Notice of Appeal   |          |
| 1402                | 340      | 2402         | 170      | Filing a brief in support of an appeal                                     |          |
| 1403                | 300      | 2403         | 150      | Request for oral hearing   |          |
| 1451                | 1,510    | 2451         | 1,510    | Petition to institute a public use proceeding                              |          |
| 1452                | 110      | 2452         | 55       | Petition to revive - unavoidable   |          |
| 1453                | 1,370    | 2453         | 685      | Petition to revive - unintentional   |          |
| 1501                | 1,370    | 2501         | 685      | Utility issue fee (or reissue)   |          |
| 1502                | 480      | 2502         | 245      | Design issue fee   |          |
| 1503                | 660      | 2503         | 330      | Plant issue fee  |          |
| 1450                | 130      | 2450         | 130      | Petitions to the Commissioner  |          |
| 1807                | 50       | 1807         | 50       | Processing fee under 37 CFR 1.17(a)  |          |
| 1806                | 180      | 1806         | 180      | Submission of Information Disclosure Sheet                                 |          |
| 8021                | 40       | 8021         | 40       | Recording each patent assignment per property (times number of properties) |          |
| 1809                | 790      | 1809         | 395      | Filing a submission after final rejection (37 CFR § 1.129(a))              |          |
| 1810                | 790      | 2810         | 395      | For each additional invention to be examined (37 CFR § 1.129(b))           |          |
| 1801                | 790      | 2801         | 395      | Request for Continued Examination (RCE)                                    |          |
| 1802                | 900      | 1802         | 900      | Request for expedited examination of a design application                  |          |
| Other fee (specify) |          |              |          |  |          |

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

## SUBMITTED BY

## Complete (if applicable)

|                   |                 |                                   |          |           |                |
|-------------------|-----------------|-----------------------------------|----------|-----------|----------------|
| Name (Print/Type) | Thinh V. Nguyen | Registration No. (Attorney/Agent) | 42,034   | Telephone | (714) 557-3800 |
| Signature         |                 | Date                              | 11/30/04 |           |                |

Based on PTO/SB-17 (10-03) as modified by Blakely, Sokoloff, Taylor & Zafman (vif) 02/10/2004.  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 10/676,961  
Amdt. Dated 11/30/2004  
Reply to Office action of 11/01/2004

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application. No. : 10/676,961  
Applicant : Florence R. Pon  
Filed : 09/30/2003  
TC/A.U. : 2815  
Examiner : Chris C. Chu

Confirmation No. 8131

Docket No. : 042390.P17605  
Customer No. : 8791

Commissioner for Patents  
PO Box 1450  
Alexandria VA 22313-1450

**RESPONSE TO RESTRICTION REQUIREMENT**

Sir:

In the Office Action mailed November 1, 2004, the Examiner contends that Applicant claims three distinct inventions; namely, Group I (claims 1-20), drawn to a method, classified in class 438, subclass 1+, and Group II (claims 21-30) drawn to a die assembly, classified in class 257, subclass 723. Thus, pursuant to 35 U.S.C. 121, the Examiner requires Applicants to restrict the application to one of the alleged three inventions.

In compliance with 35 U.S.C. §121, Applicants elect Group I (claims 1-20).

The Examiner further contends that the application contains the following patentably distinct species:

- i) Species I depicted in Fig. 1A.
- ii) Species II depicted in Fig. 1B.
- iii) Species III depicted in Fig. 2A (claims 1, 2 and 6-10).
- iv) Species IV depicted in Fig. 2B (claims 13 and 23).
- v) Species V depicted in Fig. 3 (claims 3-5, 14, 17, 18, 24, 27, 28).
- vi) Species VI depicted in Fig. 4A (claims 11, 12, 15, 19-22, 25, 29, and 30).
- vii) Species VII depicted in Fig. 5 (claims 16 and 26).

Appl. No. 10/676,961  
Amdt. Dated 11/30/2004  
Reply to Office action of 11/01/2004

Applicants respectfully traverse the species restriction. All figures belong to the same generic species.

Figure 1A shows a package assembly including the die 120. Figure 1B shows the dies 120. The dies may be stacked in a stair-case or an alternate staggering configuration. Figures 2A and 2B shown the cross-sectional and top vies of stair-case configuration. Figure 3 shows top view of alternate staggering configuration. Figure 5 shows the top view of the alternate staggering configuration. Figure 6 shows a flowchart to illustrate the process of stacking the dies. Therefore, these figures are illustrations of various embodiments of the same species.

However, in compliance with 35 U.S.C. 121, Applicants elect species III depicted in Figure 2A. Applicants submit that claims 1-10 are readable on the elected species.

Appl. No. 10/676,961  
Amdt. Dated 11/30/2004  
Reply to Office action of 11/01/2004

### Conclusion

Applicant respectfully requests that a timely Notice of Allowance be issued in this case.

Respectfully submitted,

BLAKELY SOKOLOFF, TAYLOR & ZAFMAN LLP

Dated: November 30, 2004

By

  
Thanh V. Nguyen

Reg. No. 42,034

Tel.: (714) 557-3800 (Pacific Coast)

12400 Wilshire Boulevard, Seventh Floor  
Los Angeles, California 90025

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#### CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

I hereby certify that this correspondence is, on the date shown below, being:

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☐ deposited with the United States Postal Service  
as first class mail in an envelope addressed to:  
Commissioner for Patents, PO Box 1450,  
Alexandria, VA 22313-1450.

Date: November 30, 2004

##### FACSIMILE

☒ transmitted by facsimile to the Patent and  
Trademark Office.

  
Tu Nguyen

November 30, 2004

Date